

PO2000036775

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP     WAIT     MAIL

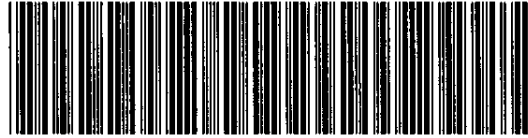
(Business Entity Name)

(Document Number)

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old Resignation

JUN 26 2015

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**TRANSMITTAL LETTER**

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** Our Crew Inc.  
(Name of Corporation)

**DOCUMENT NUMBER:** P02000036775

The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing.  
Please return all correspondence concerning this matter to the following:

**Raul I. Garcia, DMD**  
\_\_\_\_\_  
(Name of Person)

\_\_\_\_\_  
(Name of Firm/Company)

**9301 SW 56 Street Suite A**  
\_\_\_\_\_  
(Address)

**Miami, FL 33165**  
\_\_\_\_\_  
(City/State and Zip Code)

For further information concerning this matter, please call:

\_\_\_\_\_ at (\_\_\_\_\_) \_\_\_\_\_  
(Name of Person) (Area Code & Daytime Telephone Number)

Enclosed is a check for \$35.00 made payable to the Florida Department of State.

**Mailing Address:**  
Amendment Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

**Street Address:**  
Amendment Section  
Division of Corporations  
2661 Executive Center Circle  
Tallahassee, FL 32301

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA  
15 JUN 17 PM 2:27  
FILED

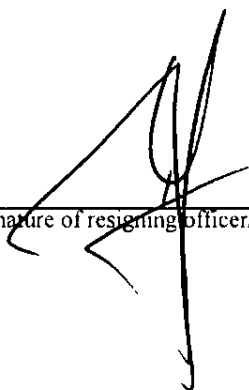
**OFFICER / DIRECTOR RESIGNATION  
FOR A CORPORATION**

I, William Lamas, hereby resign as Vice President  
(Title)

of Our Crew Inc.  
(Name of Corporation)

P02000036775, a corporation organized under the laws of the State of  
(Document Number, if known)

Florida

  
(Signature of resigning officer/director)

**FILING FEE IS \$35.00**

SECRETARY OF STATE  
TALLAHASSEE  
15 JUN 17 PM 2:27

**Make checks payable to Florida Department of State and mail to:**

Amendment Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, Florida 32314